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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).								lete if Known 0,607				
FEE TRANSMITTAL					<del> </del>			2/29/2003				
For FY 2006					First Named Inve	12/29/20 Song	-					
101112000					Examiner Name	Sugent, James						
Applicant cl	⊢	Art Unit	2116									
TOTAL AMOUNT OF PAYMENT (\$) 120.00								35767				
METHOD OF	PAYMENT (chec			,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
WIETHODOF	T CHEC	K all that	appiy)									
Check Credit Card Money Order Other (please identify):												
Deposit Account Deposit Account Number: 20-0668 Deposit Account Name: Texas Instruments Inc.												
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)												
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee												
Charge any additional fee(s) or underpayments of fee(s)												
under 37 CFR 1.16 and 1.17  WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card												
information and authorization on PTO-2038.												
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)												
1. BASIC FILII	NG, SEARCH, A	ND EXAI NG FEES					41147101					
		Small	·		H FEES Small Entity			TION FEES mall Entity				
Application 1					Fee (\$)	Fee	<i>'</i>	e (\$)	<u>Fe</u>	es Paid (\$)		
Utility	300		-	)	250	200	) 10	00				
Design	200		100	)	50	130	) 6	55				
Plant	200	100	300	)	150	160	) 8	30				
Reissue	300	150	500	)	250	600	30	00				
Provisional	200	100	) (	)	0	(	)	0				
2. EXCESS CLAIM FEES Fee Description F										Small Entity Fee (\$)		
Each claim			-	<b>50</b>	2:							
Each independent claim over 3 (including Reissues)								200	10	0		
Multiple dependent claims								360	180	-		
<u>Total Claims</u>		Extra Claims Fee (\$)		Fee Paid (\$)			_	Multiple Dependent Claims Fee (\$) Fee Paid (\$				
	mber of total claims p				<del> </del>			Fee (\$)	ree	e raid (\$)		
Indep. Claims	Extra (		Fee (\$) F	ee P	aid (\$)							
3 or HP = <b>x</b> = HP = highest number of independent claims paid for, if greater than 3.												
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer												
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).												
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$)										Fee Paid (\$	)	
100 = / 50 = (round <b>up</b> to a whole number) x											_	
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)										Fees Paid	<u>(\$)</u>	
Other (e.g., late filing surcharge): One Month Extension										120.00		
SUBMITTED BY											=	
Signature	Registration No.			Telepho	Telephone 720-266-4728							
Jame (Print/Tyne)	/Douglas M. Hamil	(At	ttomey/Agent/			Date 08/14/2006						

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.